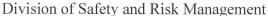


U.S. Department of the Interior

Indian Affairs



Employee Report of Unsafe or Unhealthful Working Condition



Purpose: Any employee or representative of employees, who believes that an unsafe or unhealthful working condition exists in any workplace where such employee is employed, shall have the right and is encouraged to make a report of the unsafe or unhealthful working condition to an appropriate agency safety and health official and request an inspection of such workplace for this purpose. The report shall be reduced to writing either by the individual submitting the report or, in the case of an oral notification, by the above official or other person designated to receive the reports in the workplace. Any such report shall set forth grounds for the report and shall contain the name of the employee or representative of employees. Upon the request of the individual making such report, no person shall disclose the name of the individual making the report or the names of individual employees referred to in the report, to anyone other than authorized representatives of the Secretary. In the case of imminent danger situations, employees shall make reports by the most expeditious means available.

Date:	Agency / Offi	ce:		
Location Description (e.g. Bright Day	School, Building	252, Suite 100, Nor	ortheast side of room):	
Name:		Title:		
Contact Information:				
Do you wish to remain anonymous:	Yes No			
Supervisor Name:		Title:		
Contact Information:				-
Does this hazard immediately threaten life or the cause of serious bodily harm? Yes No				
Describe the hazard. Provide detailed this form:	l information, stat	tements and photos,	s, if available. Attach supporting documentation to	
If known, provide standard(s) which you claim to have been violated:				
To your knowledge, has this violation been previously reported? Yes No Unknown				
If yes, to whom and when the violatio	n was reported:			_
	7.2	DODLE HOT OFF		
FOR DSRM USE ONLY				
DSRM Comments:				
Name:	Title:		Date:	
D.C				